## Case 2:19-bk-57965 Doc 1 Filed 12/13/19 Entered 12/13/19 13:29:08 Desc Main Document Page 1 of 49

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself				
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	About Debtor 2 (Spouse Only in a	
1.	Your full name				
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	E. Middle name	First name  Middle name		
	Bring your picture identification to your meeting with the trustee.	Bondurant Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years				
	Include your married or maiden names.				
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3231			

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Debtor 1 Crystal E. Bondurant

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs			
5.	Where you live	5154 Buckeye Court Lewis Center, OH 43035	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Delaware County	County			
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Case 2:19-bk-57965 Doc 1 Filed 12/13/19 Entered 12/13/19 13:29:08 Desc Main Page 3 of 49 Document Debtor 1 Crystal E. Bondurant Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with

Have you filed for bankruptcy within the last 8 years?

District When Case number
District When Case number
District When Case number
District When Case number

I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay

I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may,

the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.

but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out

filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When District Case number, if known

11. Do you rent your residence?

10. Are any bankruptcy

cases pending or being

■ No. Go to line 12.

a pre-printed address.

■ No

The Filing Fee in Installments (Official Form 103A).

☐ Yes. Has your landlord obtained an eviction judgment against you?

☐ No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

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Debtor 1 Crystal E. Bondurant			Case number (if known)					
Part	Report About Any Bu	usinesses	You Own	as a Sole Proprietor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	No. Go to Part 4.					
		☐ Yes.	Name	e and location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach		Numbe	per, Street, City, State & ZIP Code				
	it to this petition.		Check	k the appropriate box to describe your business:				
				Health Care Business (as defined in 11 U.S.C. § 101(27A))				
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				
				Stockbroker (as defined in 11 U.S.C. § 101(53A))				
				Commodity Broker (as defined in 11 U.S.C. § 101(6))				
				None of the above				
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?  If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, so operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the in 11 U.S.C. 1116(1)(B).					of			
	For a definition of small	■ No.	I am n	not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
		☐ Yes.	I am fi	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Cod	е.			
Part	t 4: Report if You Own or	r Have Any	y Hazardo	ous Property or Any Property That Needs Immediate Attention				
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is t	the hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?				
For example, do you own perishable goods, or livestock that must be fed or a building that needs urgent repairs?			Where is	s the property?				

Number, Street, City, State & Zip Code

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Debtor 1 Crystal E. Bondurant

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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DCD	Crystal E. Bolldul	anı							
Part	6: Answer These Quest	ions for Re	porting Purposes						
16.	What kind of debts do you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  ☐ No. Go to line 16b.						
			Yes. Go to line 17.	husiness dehts? Rusiness dehts a	re debts that you incurred to obtain				
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you	u owe that are not consumer debts or	r business debts				
17.	Are you filing under Chapter 7?	□ No.	l am not filing under Chapt	ter 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and			7. Do you estimate that after any exercises available to distribute to unsecured of	mpt property is excluded and administrative exper creditors?	ises			
	administrative expenses		■ No						
	are paid that funds will be available for distribution to unsecured creditors?		□ Yes						
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000				
19.	How much do you estimate your assets to be worth?	□ \$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 millior □ \$10,000,001 - \$50 millio □ \$50,000,001 - \$100 milli □ \$100,000,001 - \$500 mi	on				
20.	How much do you estimate your liabilities to be?	□ \$100,0	0,000 11 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 milli □ \$100,000,001 - \$500 mi	on				
Part	:7: Sign Below								
For	you	If I have ch	nosen to file under Chapter	r 7, I am aware that I may proceed, it	the information provided is true and correct.  f eligible, under Chapter 7, 11,12, or 13 of title 11,				
	United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).								
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.									
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 151 and 3571.  /s/ Crystal E. Bondurant							
		Crystal E	E. Bondurant of Debtor 1	Signature	of Debtor 2	_			
		Executed	December 13, 201	9 Executed	on MM / DD / YYYY	_			

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Debtor 1 Crystal E. Bondurant Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Michael A. Cox	Date	December 13, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Michael A. Cox 0075218		
Guerrieri, Cox & Associates		
Firm name		
3478 N. High Street		
Suite 100		
Columbus, OH 43214		
Number, Street, City, State & ZIP Code		
Contact phone (614) 267-2871	Email address	coxecf@columbusdebtrelief.com
0075218 OH		
Bar number & State		

Certificate Number: 17082-OHS-CC-033821717



## **CERTIFICATE OF COUNSELING**

I CERTIFY that on <u>December 11, 2019</u>, at <u>10:43</u> o'clock <u>PM MST</u>, <u>CRYSTAL BONDURANT</u> received from <u>Summit Financial Education</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the <u>Southern District of Ohio</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: December 11, 2019 By: /s/Lillie Hernandez

Name: Lillie Hernandez

Title: Certified Credit Counselor

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

E:III	in this inform	nation to identify you				
		nation to identify you				
Del	otor 1	Crystal E. Bonde	Middle Name	Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT (	OF OHIO		
Cod	aa numbar					
	se number 				-	Check if this is an mended filing
	ficial Fo		Affaira fan Indivis	duala Filipa fan D		
<b>S</b> ta	atement	of Financial	Affairs for Individ	duals Filling for B	ankruptcy	4/19
num	nber (if know	n). Answer every ques			/ additional pages, write you	ir name and case
1.	What is you	r current marital statu	ıs?			
	<ul><li>☐ Married</li><li>■ Not mar</li></ul>	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No		-	-		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>.</i>	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory co, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ake sure you fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).		
Par	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$13,315.18	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Debtor 1 Cr	ystal E. Bondurant			e number (if known)	
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last caler (January 1 to	ndar year: December 31, 2018 )	■ Wages, commissions, bonuses, tips	\$12,003.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	dar year before that: December 31, 2017)	■ Wages, commissions, bonuses, tips	\$8,596.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
□ No	Fill in the details.	me from each source separa	,	·	
		Debtor 1	Crass income from	Debtor 2	Cross income
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
	y 1 of current year until filed for bankruptcy:	boyfriend contribution	\$32,538.00		
Part 3: Lis	t Certain Payments You	Made Before You Filed for	Bankruptcy		
6. Are eithe No.	Neither Debtor 1 nor D	s debts primarily consumer ebtor 2 has primarily consu- personal, family, or househol	ımer debts. Consumer debts	are defined in 11 U.S.C. § 10	1(8) as "incurred by an
	☐ No. Go to line 7	re you filed for bankruptcy, di	d you pay any creditor a total	of \$6,825* or more?	
	paid that cre not include	editor. Do not include paymer payments to an attorney for the	nts for domestic support obligations bankruptcy case.	n one or more payments and t ations, such as child support a or after the date of adjustment	and alimony. Also, do
■ Yes.		r both have primarily consure you filed for bankruptcy, di		of \$600 or more?	

**Creditor's Name and Address** 

No.

Go to line 7.

Dates of payment

**Total amount** paid

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Amount you still owe

Was this payment for ...

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Debtor 1	Crystal E. Bondurant		Cas	se number (if known)		
<i>Insid</i> of wh	in 1 year before you filed for bankrupto ders include your relatives; any general panich you are an officer, director, person in siness you operate as a sole proprietor. 10 ony.	rtners; relatives of any go control, or owner of 20%	eneral partners; partners or more of their votin	erships of which yo g securities; and ar	u are a general ny managing ag	partner; corporations ent, including one for
■	No Yes. List all payments to an insider.					
Insi	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	nis payment
insid Inclu	de payments on debts guaranteed or cosi		ayments or transfer a	any property on a	ccount of a del	ot that benefited an
⊔ Insi	Yes. List all payments to an insider ider's Name and Address	Dates of payment	Total amount	Amount you	Reason for t	nis payment
			paid	still owe	Include credit	or's name
Part 4:	Identify Legal Actions, Repossession	s, and Foreclosures				
List a	ain 1 year before you filed for bankrupto all such matters, including personal injury ifications, and contract disputes.  No  Yes. Fill in the details.					
	se title se number	Nature of the case	Court or agency	,	Status of the	case
	in 1 year before you filed for bankruptock all that apply and fill in the details below No. Go to line 11.		perty repossessed, f	foreclosed, garnis	hed, attached,	seized, or levied?
	Yes. Fill in the information below.	December the Brown and		Dete		Walter of the
Cre	ditor Name and Address	Describe the Property  Explain what happen		Date		Value of the property
	nin 90 days before you filed for bankrup ounts or refuse to make a payment beca No Yes. Fill in the details.	· · · · · · · · · · · · · · · · · · ·	•	nancial institution	, set off any an	nounts from your
_	ditor Name and Address	Describe the action the	ne creditor took	Date taken	action was	Amount
	nin 1 year before you filed for bankrupto tt-appointed receiver, a custodian, or an		perty in the possess	sion of an assigne	e for the benef	it of creditors, a
	No Yes					
Part 5:	List Certain Gifts and Contributions					
13. <b>With</b>	nin 2 years before you filed for bankrupt	cy, did you give any gi	fts with a total value	of more than \$60	0 per person?	
	No Yes. Fill in the details for each gift.					
	s with a total value of more than \$600 person	Describe the gift	s	Dates the g	s you gave ifts	Value

Address:

Person to Whom You Gave the Gift and

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Deb	otor 1 Crystal E. Bondurant				Case number	(if known)	
14.	Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift or co			gifts or contrib	outions with a tota	ıl value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what	you contribute	ed	Dates you contributed	Value
Par	t 6: List Certain Losses						
15.	Within 1 year before you filed for bankrup or gambling?	otcy or	since you filed fo	or bankruptcy,	did you lose anyt	thing because of the	ft, fire, other disaster
	■ No □ Yes. Fill in the details.						
	Describe the property you lost and how the loss occurred	Include	the amount that ince claims on line 3	nsurance has p	aid. List pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers				, ,		
16.	Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or pulclude any attorneys, bankruptcy petition pulclude.	otcy, die	ig a bankruptcy p	etition?			rty to anyone you
	□ No						
	Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and transferred	d value of any	property	Date payment or transfer was made	Amount of payment
	Guerrieri Cox & Associates 3478 N. High Street Suite 100 Columbus, OH 43214		Attorney Fees	3		12/2019	\$700.00
	Summit Financial Education, Inc. 4800 E. Flower Street Tucson, AZ 85712		Consumer Cr	edit Counse	ing Course	12/2019	\$14.95
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that	litors or	to make paymer			or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Address		Description and transferred	d value of any	property	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankru transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have alrest No  Yes. Fill in the details.	r busine made a	ess or financial and security (such a	ffairs? s the granting			

**Person Who Received Transfer** Address

Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

Official Form 107

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Debtor 1 Crystal E. Bondurant

Case number (if known)

19.	beneficiary? (These are often called asset-protect		y property to a	a seit-settie	ed trust or similar device o	or which you are a		
	Yes. Fill in the details.							
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer was made		
Pai	tt 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and S	torage Unit	ts			
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associated.	other financial accour	nts; certificate	s of deposi		, ,		
	No Yes. Fill in the details.							
		ast 4 digits of ccount number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed for	bankruptcy, a	ıny safe de	posit box or other deposi	tory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?		
22.	Have you stored property in a storage unit or p	place other than your	home within 1	1 year befo	re you filed for bankrupto	y?		
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do you still have it?		
Pai	rt 9: Identify Property You Hold or Control for	r Someone Else						
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ude any prope	rty you bor	rowed from, are storing f	or, or hold in trust		
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value		
Pai	rt 10: Give Details About Environmental Inform	nation						
For	the purpose of Part 10, the following definitions	s apply:						
Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including staregulations controlling the cleanup of these substances, wastes, or material.								
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	•	environmental	law, wheth	ner you now own, operate	, or utilize it or used		
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.							

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Crystal E. Bondurant

Case number (if known)

24.	Has any governmental unit notified you that you	ມ may be liable or potentially liable ເ	under or in violation of an environme	ntal law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	,		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis 	strative proceeding under any enviro	onmental law? Include settlements a	nd orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or Con	nections to Any Business		
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have any	of the following connections to any	business?
	☐ A sole proprietor or self-employed in a t	rade, profession, or other activity, e	either full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partnership	(LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing execut	ive of a corporation		
	☐ An owner of at least 5% of the voting or	equity securities of a corporation		
	■ No. None of the above applies. Go to Part	12.		
	☐ Yes. Check all that apply above and fill in t	he details below for each business.		
		scribe the nature of the business	Employer Identification number	
	Address (Number, Street, City, State and ZIP Code)	me of accountant or bookkeeper	Do not include Social Security r	number or ITIN.
28.	Within 2 years before you filed for bankruptcy, oinstitutions, creditors, or other parties.	did you give a financial statement to	anyone about your business? Inclu	de all financial
	■ No □ Yes. Fill in the details below.			
	Name Address (Number, Street, City, State and ZIP Code)	te Issued		

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Case number (if known)

Debtor 1 Crystal E. Bondurant Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Crystal E. Bondurant Signature of Debtor 2 Crystal E. Bondurant Signature of Debtor 1 Date December 13, 2019 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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		Docume	nt Page 16 of 49	
Fill in this infor	mation to identify your	case:		
Debtor 1	Crystal E. Bondu	rant		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number (if known)				☐ Check if this is an amended filing
Official Fo	orm 106Sum			

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

t 1: Summarize Your Assets		
		ssets f what you own
Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,721.02
1c. Copy line 63, Total of all property on Schedule A/B	\$	2,721.0
t 2: Summarize Your Liabilities		
		abilities : you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	3,883.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	49,673.0
Your total liabilities	\$	53,556.09
t 3: Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,958.8
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,672.0
t 4: Answer These Questions for Administrative and Statistical Records		
Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	edules.
■ Yes What kind of debt do you have?		
	1a. Copy line 55, Total real estate, from Schedule A/B	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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Debtor 1 Crystal E. Bondurant

Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,176.97

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	42,446.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	42,446.00

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			Document	Page 18 of 49		
Fill in this	information to ident	fy your case ar	nd this filing:			
Debtor 1	Crystal F	Bondurant				
Dobtor !	First Name		Middle Name	Last Name		
Debtor 2						
(Spouse, if fili	ng) First Name		Middle Name	Last Name		
United Sta	tes Bankruptcy Court f	or the: SOUT	HERN DISTRICT OF O	HIO		
0	h					_
Case num	ber					☐ Check if this is an amended filing
						amended ming
		_				
<u>Officia</u>	I Form 106A/	<u>′B</u>				
Sche	dule A/B: F	Property	<i>'</i>			12/15
				If an asset fits in more than or	ne category list the asset i	
think it fits l	pest. Be as complete an If more space is neede	d accurate as po	ssible. If two married peo	ople are filing together, both ar the top of any additional page	e equally responsible for s	upplying correct
Part 1: De	scribe Each Residence.	Building, Land,	or Other Real Estate You	Own or Have an Interest In		
1. Do you o	wn or have any legal or	equitable interes	t in any residence, buildi	ng, land, or similar property?		
■ No. Go	o to Part 2.					
∏ Yes \	Where is the property?					
<b>—</b> 103. (	where is the property:					
Part 2: De	scribe Your Vehicles					
someone e		a vehicle, also	report it on Schedule G	s, whether they are register : Executory Contracts and Ui		·
					5	1
3.1 Mak			Who has an interest in	the property? Check one		claims or exemptions. Put red claims on <i>Schedule D:</i>
Mod			■ Debtor 1 only		Creditors Who Have Cla	aims Secured by Property.
Yea		010.000	Debtor 2 only		Current value of the	Current value of the
	roximate mileage: er information:	216,000	Debtor 1 and Debtor	•	entire property?	portion you own?
	er inionnation.		☐ At least one of the d	ebtors and another		
			Check if this is con (see instructions)	nmunity property	\$250.00	\$250.00
Example  No  Yes  No  Yes  Add the pages  Part 3: De	es: Boats, trailers, moto	ors, personal wat portion you own r Part 2. Write t and Household Ite	tercraft, fishing vessels, n for all of your entries hat number here	ehicles, other vehicles, and snowmobiles, motorcycle ac	ccessories	\$250.00  Current value of the

Official Form 106A/B Schedule A/B: Property page 1

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Debtor	or 1 Crystal E. Bondurant	Case number (if kno	wn)
	usehold goods and furnishings camples: Major appliances, furniture, linens, china, kitchenware		
	Yes. Describe		
			¢2.000.00
	All household goods and furniture		\$2,000.00
Exa ■ N		omputers, printers, scanners; mus	sic collections; electronic devices
ПΥ	Yes. Describe		
-	Ilectibles of value  camples: Antiques and figurines; paintings, prints, or other artwork; books, picto  other collections, memorabilia, collectibles	res, or other art objects; stamp, o	coin, or baseball card collections;
	Yes. Describe		
9. <b>Equi</b> <i>Exa</i>	uipment for sports and hobbies  camples: Sports, photographic, exercise, and other hobby equipment; bicycles,  musical instruments	pool tables, golf clubs, skis; cand	pes and kayaks; carpentry tools;
10. <b>Fire</b> <i>Ex</i>	rearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment		
■ N □ Y	No Yes. Describe		
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessor	ories	
<b>■</b> Y	res. Describe		
	Clothing owned by debtor		\$300.00
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding ring	s, heirloom jewelry, watches, gen	ns, gold, silver \$100.00
Ex	on-farm animals  Examples: Dogs, cats, birds, horses  No  Yes. Describe		
	2 dogs		
	sentimental value only		\$0.00
■ N	ny other personal and household items you did not already list, including No Yes. Give specific information	any health aids you did not lis	it
	Add the dollar value of all of your entries from Part 3, including any entric		\$2,400.00

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Debto	r 1 Crystal E. Bondurant		Case number (if known)	
Part 4:	Describe Your Financial Assets			
	u own or have any legal or equitable interest in a	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	xamples: Money you have in your wallet, in your hon	,	and when you file your petition	·
			Cash in debtor's possession	\$0.50
	eposits of money  xamples: Checking, savings, or other financial accounts to institutions. If you have multiple accounts to the country of th	• •		ouses, and other similar
	Yes	Institution name:		
	17.1. Checking	Funds available to Debt Huntington Bank	or in an account with	\$70.52
	17.2.	USAA Account negative balance at the	time of filing	\$0.00
9. <b>N</b> o <b>jo</b>	Yes Institution or issuer n on-publicly traded stock and interests in incorpor oint venture		esses, including an interest	in an LLC, partnership, and
■ ! □ `	No Yes. Give specific information about them Name of entity:		% of ownership:	
N	overnment and corporate bonds and other negot legotiable instruments include personal checks, cash ion-negotiable instruments are those you cannot tran	hiers' checks, promissory notes, an	nd money orders.	
	Yes. Give specific information about them Issuer name:			
E: ■ I	etirement or pension accounts examples: Interests in IRA, ERISA, Keogh, 401(k), 40 No Yes. List each account separately.	03(b), thrift savings accounts, or oth	her pension or profit-sharing p	lans
_	Type of account:	Institution name:		
Y	ecurity deposits and prepayments our share of all unused deposits you have made so to examples: Agreements with landlords, prepaid rent, p No			es, or others
	Yes	Institution name or individua	l:	
_	nnuities (A contract for a periodic payment of money	y to you, either for life or for a numl	per of years)	
■ I	No Yes Issuer name and description.			

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

Case 2:19-bk-57965 Doc 1 Filed 12/13/19 Entered 12/13/19 13:29:08 Page 21 of 49 Document Debtor 1 Case number (if known) Crystal E. Bondurant ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No  $\hfill \square$  Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Anticipated income tax refunds for tax year ending: 2019 **Federal** Unknown 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim.......

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Debto	Crystal E. Bondurant		Case number (if known)	
35. <b>A</b> ı	ny financial assets you did not already list			
	No			
	Yes. Give specific information			
	Add the dollar value of all of your entries from Part 4, includir or Part 4. Write that number here			\$71.02
Part 5	Describe Any Business-Related Property You Own or Have an Inter	rest In. List any real esta	te in Part 1.	
	you own or have any legal or equitable interest in any business-relat	ed property?		
	o. Go to Part 6.			
ΠY	es. Go to line 38.			
Part 6	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	ı Own or Have an Interes	st In.	
16. <b>D</b> o	you own or have any legal or equitable interest in any farm-	· or commercial fishin	g-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
E	o you have other property of any kind you did not already list examples: Season tickets, country club membership  No  Yes. Give specific information	?		
54. <i>I</i>	Add the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55. <b>F</b>	Part 1: Total real estate, line 2			\$0.00
56. <b>F</b>	Part 2: Total vehicles, line 5	\$250.00		
57. <b>F</b>	Part 3: Total personal and household items, line 15	\$2,400.00		
58. <b>F</b>	Part 4: Total financial assets, line 36	\$71.02		
59. <b>F</b>	Part 5: Total business-related property, line 45	\$0.00		
60. <b>F</b>	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>F</b>	Part 7: Total other property not listed, line 54 +	\$0.00		
62. 1	Total personal property. Add lines 56 through 61	\$2,721.02	Copy personal property total	\$2,721.02
63. 1	Total of all property on Schedule A/B. Add line 55 + line 62			\$2,721.02

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this information to identify your case:					
Debtor 1	Crystal E. Bondu	rant			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number (if known)				☐ Check if this is an amended filing	

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Print description of the assessment and time and Comment only of the Assessment of t

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
All household goods and furniture Line from <i>Schedule A/B</i> : <b>6.1</b>	\$2,000.00		\$2,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Ellio II oli II osii osii osii osii oli oli oli oli oli oli oli oli oli o			100% of fair market value, up to any applicable statutory limit	
Clothing owned by debtor Line from Schedule A/B: 11.1	\$300.00		\$300.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Elle Holli Genedale PAB. 1111			100% of fair market value, up to any applicable statutory limit	2020.00(\(\text{A}\)(\(\frac{1}{2}\)(\(\frac{1}2\)(\(\frac{1}2\)(\(\frac{1}2\)(\(\frac{1}2\)(\(\frac{1}2\)(\(\frac{1}2\)(\(\frac{1}2\)(\(\frac{1}2\)(\(\frac{1}2\)(\(\frac{1}2\)(\(\frac{1}2\)(\(\frac{1}2\)(\(\frac{1}2\)(\(\f
costume or minor jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
Ellio IIolii osiiloodio 772. TET			100% of fair market value, up to any applicable statutory limit	
Cash in debtor's possession Line from Schedule A/B: 16.1	\$0.50		\$0.50	Ohio Rev. Code Ann. § 2329.66(A)(3)
Enternetin devicable 772. 10.1			100% of fair market value, up to any applicable statutory limit	2020:00(/-)(0)
Checking: Funds available to Debtor in an account with Huntington Bank	\$70.52		\$70.52	Ohio Rev. Code Ann. § 2329.66(A)(3)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	2020.00()(0)

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De	ebtor 1 Crystal E. Bondurant			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Federal: Anticipated income tax	Unknown			Ohio Rev. Code Ann. §
	refunds for tax year ending: 2019 Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	2329.66(A)(9)(f)
	Federal: Anticipated income tax refunds for tax year ending: 2019	Unknown		\$1,325.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	2020.00(//)(//0)
	Federal: Anticipated income tax refunds for tax year ending: 2019	Unknown		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(3)
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every			led on or after the date of adjustmen	nt.)
	■ No				
	☐ Yes. Did you acquire the property cover	ered by the exemption wi	thin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

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Debtor 1  Debtor 2 (Spouse if, filir  United State  Case numble (if known)  Official  Sched	tes Bankruptcy Court for the per	Middle Name Last  Middle Name Last  SOUTHERN DISTRICT OF OHIO  S Who Have Claims Se  If two married people are filing together, be out, number the entries, and attach it to the	ooth are equa	ally responsible for su	amend  y  upplying correct informa	
Debtor 2 (Spouse if, filir United Star Case numb (if known)  Offficial Sched	First Name  res Bankruptcy Court for the per  Form 106D  Ule D: Creditors  ete and accurate as possible opy the Additional Page, fill in nown).	Middle Name Las  Middle Name Las  SOUTHERN DISTRICT OF OHIO  S Who Have Claims Se  If two married people are filing together, be out, number the entries, and attach it to the	ecured	ally responsible for su	amend  y  upplying correct informa	ded filing  12/15  tion. If more space
(Spouse if, filing United State Case number (if known)  Official Sched	res Bankruptcy Court for the per	SOUTHERN DISTRICT OF OHIO  S Who Have Claims Se  If two married people are filing together, be out, number the entries, and attach it to the	ecured	ally responsible for su	amend  y  upplying correct informa	ded filing  12/15  tion. If more space
(Spouse if, filing United State Case number (if known)  Official Sched	Form 106D  ule D: Creditors  ete and accurate as possible opy the Additional Page, fill innown).	SOUTHERN DISTRICT OF OHIO  S Who Have Claims Se  If two married people are filing together, be out, number the entries, and attach it to the	ecured	ally responsible for su	amend  y  upplying correct informa	ded filing  12/15  tion. If more space
United Star Case numl (if known)  Official Sched	Form 106D  ule D: Creditors  ete and accurate as possible opy the Additional Page, fill innown).	SOUTHERN DISTRICT OF OHIO  S Who Have Claims Se  If two married people are filing together, be out, number the entries, and attach it to the	ecured	ally responsible for su	amend  y  upplying correct informa	ded filing  12/15  tion. If more space
Case numl (if known)  Official Sched	Form 106D  ule D: Creditors  ete and accurate as possible opy the Additional Page, fill innown).	S Who Have Claims Se  If two married people are filing together, be out, number the entries, and attach it to the	ooth are equa	ally responsible for su	amend  y  upplying correct informa	ded filing  12/15  tion. If more space
Official Sched	Form 106D  ule D: Creditors  ete and accurate as possible opy the Additional Page, fill in nown).	. If two married people are filing together, b out, number the entries, and attach it to th	ooth are equa	ally responsible for su	amend  y  upplying correct informa	ded filing  12/15  tion. If more space
Official Sched	ete and accurate as possible opy the Additional Page, fill innown).	. If two married people are filing together, b out, number the entries, and attach it to th	ooth are equa	ally responsible for su	amend  y  upplying correct informa	ded filing  12/15  tion. If more space
Sched	ete and accurate as possible opy the Additional Page, fill innown).	. If two married people are filing together, b out, number the entries, and attach it to th	ooth are equa	ally responsible for su	<b>y</b> Ipplying correct informa	12/15
Sched	ete and accurate as possible opy the Additional Page, fill innown).	. If two married people are filing together, b out, number the entries, and attach it to th	ooth are equa	ally responsible for su	upplying correct informa	tion. If more space
Sched	ete and accurate as possible opy the Additional Page, fill innown).	. If two married people are filing together, b out, number the entries, and attach it to th	ooth are equa	ally responsible for su	upplying correct informa	tion. If more space
	ete and accurate as possible opy the Additional Page, fill it nown).	. If two married people are filing together, b out, number the entries, and attach it to th	ooth are equa	ally responsible for su	upplying correct informa	tion. If more space
	opy the Additional Page, fill it nown).	out, number the entries, and attach it to th				
	•	ov your property?				
1. Do any cr	Jantoro mavo olamno cocarca i	· / / · · ·     ·				
□ No.	Check this box and submit	this form to the court with your other scho	edules. You	u have nothing else t	o report on this form.	
■ Yes	. Fill in all of the information	below.		-		
	List All Secured Claims					
		more than one secured claim, list the creditor	r senarately	Column A	Column B	Column C
for each clai	<ul> <li>If more than one creditor has</li> </ul>	as a particular claim, list the other creditors in P		Amount of claim	Value of collateral	Unsecured
much as pos	ssible, list the claims in alphabe	tical order according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
	lit Acceptance	Describe the manner to the terror the		\$3,883.00	\$250.00	\$3,633.00
Corp	oration or's Name	Describe the property that secures the c		ψ3,003.00	Ψ230.00	Ψ3,033.00
Oroano	. o . tae	2007 Hyundai Sonata 216,000 m	liles			
PO F	3ox 5070	As of the date you file, the claim is: Check	k all that			
Sout	thfield, MI 48086	apply. ☐ Contingent				
Numbe	er, Street, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
	the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1	-	☐ An agreement you made (such as morto car loan)	gage or secu	red		
Debtor 2	•					
_	and Debtor 2 only	Statutory lien (such as tax lien, mechani	ic's lien)			
	one of the debtors and another	☐ Judgment lien from a lawsuit	401			
	this claim relates to a nity debt	Other (including a right to offset)	101			
Date debt w	vas incurred 2/2017	Last 4 digits of account number	6682			

Add the dollar value of your entries in Column A on this page. Write that number here: \$3,883.00 If this is the last page of your form, add the dollar value totals from all pages. \$3,883.00 Write that number here:

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		D	ocument Page	26 of 49	
Fill in thi	s information to identify yo	ur case:			
Debtor 1	Crystal E. Bond	durant			
	First Name	Middle Nan	ne Last Nam	9	
Debtor 2	ling) First Name	Middle Nan	ne Last Nam		
(Spouse if, fi	iing) First Name	Middle Nan	ie Last Nam	÷	
United St	ates Bankruptcy Court for the	: SOUTHERN	DISTRICT OF OHIO		
Case nun	nber				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106E/F				
	ule E/F: Creditors	Who Have I	Insecured Claim	e	12/15
any execut Schedule C Schedule D left. Attach	ory contracts or unexpired least E: Executory Contracts and Unio E: Creditors Who Have Claims	ses that could result expired Leases (Offi Secured by Property	in a claim. Also list executo cial Form 106G). Do not inclu . If more space is needed, co	ry contracts on Schedule A/E ide any creditors with partiall py the Part you need, fill it ou	ONPRIORITY claims. List the other party to 3: Property (Official Form 106A/B) and on ly secured claims that are listed in ut, number the entries in the boxes on the e top of any additional pages, write your
Part 1:	List All of Your PRIORITY	Unsecured Claim	S		
_	y creditors have priority unsec	ured claims against	you?		
_ `	. Go to Part 2.				
☐ Ye	S.				
Part 2:	List All of Your NONPRIO	RITY Unsecured 0	Claims		
3. Do an	y creditors have nonpriority un	secured claims aga	inst you?		
□ No	. You have nothing to report in th	is part. Submit this fo	rm to the court with your other:	schedules.	
■ Ye		o para Gazrini ano io	to and oddit man your oanor	35.1044.001	
unsec	ured claim, list the creditor separa ne creditor holds a particular clair	ately for each claim. F	or each claim listed, identify wl	nat type of claim it is. Do not list	editor has more than one nonpriority tolaims already included in Part 1. If more disclaims fill out the Continuation Page of
					Total claim
4.1 <b>A</b>	ÆΡ	L	ast 4 digits of account numb	er 6610	\$141.09
	onpriority Creditor's Name		Wh	44/0040	
	ttn: Bankruptcy O Box 24401	· ·	When was the debt incurred?	11/2019	
	Santon, OH 44701-4401				
	umber Street City State Zip Code		as of the date you file, the cla	im is: Check all that apply	
_	/ho incurred the debt? Check o -		_		
_	Debtor 1 only		Contingent		
_	Debtor 2 only		Unliquidated		
	Debtor 1 and Debtor 2 only	_	Disputed	and alaims.	
_	At least one of the debtors and	Г	ype of NONPRIORITY unsec ☐ Student loans	urea ciaim:	
d	Check if this claim is for a co ebt the claim subject to offset?	ommunity [		eparation agreement or divorce	e that you did not
_	No			aring plans, and other similar d	ebts
	Yes			and other omittee	
	⊒ 162	•	Other. Specify Utility		

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Crystal E. Bondurant		ase number (if known)	
All State Career Inc.  Nonpriority Creditor's Name	Last 4 digits of account number	8858	\$1,002.00
1200 Lebanon Road	When was the debt incurred?	2018	
#1	_		
West Mifflin, PA 15122  Number Street City State Zip Code	As of the date you file, the claim is:	Check all that apply	
Who incurred the debt? Check one.	,	- C	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured of	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
Yes	Other. Specify Fees		
Charter Communications	Last 4 digits of account number	2774	\$387.00
Nonpriority Creditor's Name	Last 4 digits of account number		\$307.UU
PO Box 3019	When was the debt incurred?	2017	
Milwaukee, WI 53201  Number Street City State Zip Code	As of the date you file, the claim is:	Charle all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is.	. Спеск ан шасарру	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a separa	ation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
Yes	Other. Specify Fees		
Dooleys Orchard	Last 4 digits of account number	1515	\$1,892.00
Nonpriority Creditor's Name	When we the debt in surred 0	2045	
990 Plumway Lane Lewis Center, OH 43035	When was the debt incurred?	2015	
Number Street City State Zip Code	As of the date you file, the claim is:	: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured of	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separa report as priority claims	ation agreement or divorce that you did not	
No	Debts to pension or profit-sharing	plans, and other similar debts	
□Yes	Other. Specify Rent Related	<u> </u>	

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otor 1 Crystal E. Bondurant		Case number (if known)	
Mount Carmel Health	Last 4 digits of account number	5318	\$1,345.00
Nonpriority Creditor's Name 6150 E. Broad Street	When was the debt incurred?	2007	
Columbus, OH 43213  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Medical//De	efault Judgment	
		see SSN//multip	
Nelnet Loans	Last 4 digits of account number	le accounts	\$6,840.00
Nonpriority Creditor's Name PO Box 82561 Lincoln, NE 68501	When was the debt incurred?		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify		
	Educationa	al	
Progressive Leasing	Last 4 digits of account number	see SSN	Unknown
Nonpriority Creditor's Name 256 W. Data Drive	When was the debt incurred?	2016	
Draper, UT 84020  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•		
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separate of the separate of th	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	☐ Debts to pension or profit-sharing	••	
Yes	■ Other. Specify Purchase	Agreementno longer has items	

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Debt	Crystal E. Bondurant		Case number (if known)	
4.8	Sprint	Last 4 digits of account number	5932	\$499.00
	Nonpriority Creditor's Name  Bankruptcy Department  PO Box 7949	When was the debt incurred?	2016	
	Overland Park, KS 66207  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Cell Phone		
4.9	St. Andrews Bay ER Physicians	Last 4 digits of account number	4296	\$1,087.00
	Nonpriority Creditor's Name 615 N. Bonita Avenue Panama City, FL 32401	When was the debt incurred?	2015	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Medical		
4.1 0	Stern Recovery Services	Last 4 digits of account number	NZXX	\$220.00
	Nonpriority Creditor's Name 1102 Grecade Street	When was the debt incurred?	2016	
	Greensboro, NC 27408-8710  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	a ciaim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separate as priority aloins.	aration agreement or divorce that you did not	
		report as priority claims  Debts to pension or profit-sharir	ag plane, and other similar debts	
	■ No			
	☐ Yes	Other. Specify Medical co	llections	

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Case number (if known)

4.1	U.S. Department of Education/GLELSI	Last 4 digits of account number	see SSN//multip le accounts	\$35,606.00					
	Nonpriority Creditor's Name 2401 International Lane Madison, WI 53704	When was the debt incurred?		-					
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply						
	_	Пол							
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community debt	■ Student loans  □ Obligations arising out of a sena	ration agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims	nation agreement of divorce that you did not						
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts						
	☐ Yes	Other. Specify		_					
		Educationa	ıl						
4.1	Untied Collection Bureau	Last 4 digits of account number	see SSN	\$654.00					
2	Nonpriority Creditor's Name 5620 Southwyck Boulevard Suite 206	When was the debt incurred?	2015	-					
	Toledo, OH 43614  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply						
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
Debtor 1 and Debtor 2 only		□ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not						
	No	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts							
	☐ Yes	Other. Specify     Unsecured	g plans, and other similar debts						
	33	— Other. Specify		-					
Part :	3: List Others to Be Notified About a D	ebt That You Already Listed							
is tr hav	this page only if you have others to be notified ying to collect from you for a debt you owe to se more than one creditor for any of the debts the fied for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor in nat you listed in Parts 1 or 2, list the addi	Parts 1 or 2, then list the collection agency	y here. Similarly, if you					
	and Address	On which entry in Part 1 or Part 2 did you	_						
	andria Vaneck, Esq.		Part 1: Creditors with Priority Unsecured Clai						
_	Box 12577 do, OH 43606		Part 2: Creditors with Nonpriority Unsecured	Claims					
1016	uo, on 43000	Last 4 digits of account number							
Namo	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?						
	rad Credit Company	· · · · · · · · · · · · · · · · · · ·	Part 1: Creditors with Priority Unsecured Clai	ims					
-	W. Vermont Avenue		Part 2: Creditors with Nonpriority Unsecured	Claims					
Esco	ondido, CA 92025	Last 4 digits of account number	. a. z. c. c. canolo il	o.ao					
		Last 4 digits of account number							
	and Address	On which entry in Part 1 or Part 2 did you	_						
	vergent Outsourcing IO Corporate Center Drive		Part 1: Creditors with Priority Unsecured Clai						
	e 100	-	Part 2: Creditors with Nonpriority Unsecured	Claims					
	ston, TX 77041	Last 4 digits of account number							
Name	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?						
		,	<del> </del>						

Official Form 106 E/F

Debtor 1 Crystal E. Bondurant

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Debtor 1 Crystal E. Bondurant		Case number (if known)				
Credit Business Services PO Box 4127 Fort Walton Beach, FL 32549	Line 4.9 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims				
Fort Walton Beach, FL 32349	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?				
Dynamic Recovery Solutions	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 25759 Greenville, SC 29616		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Greenvine, 30 29010	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?				
Enchanced Recovery Company,	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
LLC 8014 Bayberry Rd. Jacksonville, FL 32256		Part 2: Creditors with Nonpriority Unsecured Claims				
Jacksonvine, i L 32230	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?				
FABCO	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
4640 Executive Dr. Columbus, OH 43220		Part 2: Creditors with Nonpriority Unsecured Claims				
00:0::::00::00	Last 4 digits of account number					

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 42,446.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$ 0.00
	6h.	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 7,227.09
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 49,673.09

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Fill in this infor	mation to identify your	case:	·	
Debtor 1	Crystal E. Bondu	rant		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 UMH OH Worthington Arms, LLC dba Worthington Arms 3499 Route 8 North, Suite 3-C Freehold, NJ 07728

**Mobile Home Lease Agreement** 

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		Documer	nt Page 33 of	49	
Fill in this inf	ormation to identify you	r case:			
Debtor 1	Crystal E. Bond	urant			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number (if known)					☐ Check if this is an amended filing
	Form 106H <b>le H: Your Co</b> o	debtors			12/15
people are fili ill it out, and your name an	ng together, both are eq number the entries in th d case number (if know	ually responsible for supp	lying correct information the Additional Page to	on. If more space is need this page. On the top of	e as possible. If two married eded, copy the Additional Page, of any Additional Pages, write
□No					
Yes					
		ou lived in a community pro a, Nevada, New Mexico, Pue			states and territories include
■ No. Go		ouse, or legal equivalent live	with you at the time?		
in line 2 a	again as a codebtor only SD), Schedule E/F (Offici	if that person is a guarant	or or cosigner. Make su	ure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	umn 1: Your codebtor e, Number, Street, City, State and	ZIP Code		Column 2: The cred Check all schedules	itor to whom you owe the debt that apply:
515	even Jackson 54 Buckeye Court wis Center, OH 43035			■ Schedule D, line □ Schedule E/F, li □ Schedule G Credit Acceptanc	ine

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						•			
	in this information to identify your countries to a Crystal E. B								
	btor 2 buse, if filing)								
Uni	ited States Bankruptcy Court for the	: SOUTHERN DISTRIC	CT OF OHIO						
	se number 		-			Check if this is  An amend  A supplem	ed filing ent showir	ng postpetition	
0	fficial Form 106I					MM / DD/		onowing date.	
S	chedule I: Your Inc	ome				WIWI / DD/			12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  It 1: Describe Employment  Fill in your employment	ır spouse is not filing w	ith you, do not incluing ith you, do not incluing ith you included the your includes	ıde infor	mati	on about your sp I case number (if	ouse. If m known). <i>I</i>	ore space is Answer every	needed,
	information.		Debtor 1			_		iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>			■ Emp	oyed mployed		
	employers.  Include part-time, seasonal, or self-employed work.	Occupation  Employer's name	Unemployed						
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Pai	rt 2: Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form.  f	you have nothing to r	eport for	any	line, write \$0 in the	space. In	clude your noi	n-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	on for all e	emplo	oyers for that pers	on on the I	ines below. If	you need
						For Debtor 1		ebtor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	0.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$	0.00	

Official Form 106I Schedule I: Your Income page 1

Deb	otor 1	Crystal E. Bondurant	-	C	Case number	(if kno	own)					
					For Debto	r 1		_	or Debtor on-filing s		2	
	Cop	y line 4 here	4.		\$	0	.00	\$		0.0		
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	0	.00	\$		0.0	0	
	5b.	Mandatory contributions for retirement plans	5b		\$		.00	\$		0.0		
	5c.	Voluntary contributions for retirement plans	5c	;.	\$	0	.00	\$		0.0		
	5d.	Required repayments of retirement fund loans	5d	١.	\$	0	.00	\$		0.0	0	
	5e.	Insurance	5e	<b>.</b>	\$	0	.00	\$		0.0	0	
	5f.	Domestic support obligations	5f.		\$	0	.00	\$		0.0	0	
	5g.	Union dues	5g	J.	\$		.00	\$		0.0	0	
	5h.	Other deductions. Specify:	5h	1.+	\$	0	.00	+ \$		0.0	0	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	0	.00	\$		0.0	0	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	0	.00	\$		0.0	0	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total										
		monthly net income.	8a		\$		.00	\$		0.0		
	8b.	Interest and dividends	8b	).	\$	0	.00	\$		0.0	0	
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation	8c 8d	l.	\$ 	0	.00	\$		0.0 0.0	0	
	8e.	Social Security	8e	<del>)</del> .	\$	0	.00	\$		0.0	0	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  Pension or retirement income	8f. 8g		\$ \$	0	.00	\$		0.0		
	8h.	Other monthly income. Specify: Boyfriend contribution	8h	1.+	\$	0	.00	+ \$	2	,958.8	80	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	i	0	.00	\$		2,958.	.80	
10	Cal	culate monthly income. Add line 7 + line 9.	10.	Φ.	0	00	. 6		2,958.80		2.0	958.80
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_	U.	00	<b>T</b>   \$		2,956.60	=   •		30.00
11.	Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not acify:	depe						n Schedule	e <i>J</i> . +\$ _		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies								\$	2,9	958.80
40	<b>D</b> -		•								bined hly in	come
13.		you expect an increase or decrease within the year after you file this form  No.  Yes Explain:	ſ									

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:			1		
	tor 1	Crystal E. Bo				Chec	ck if this is:	
Dob	otor 2	o.you. I. D.	on dan din				An amended filing	wing postpetition chapter
	ouse, if filing)						13 expenses as of	
Unit	ed States Bankr	uptcy Court for the	: SOUTH	IERN DISTRICT OF OH	10	-	MM / DD / YYYY	
1	e number nown)							
Of	fficial Fo	rm 106J						
		J: Your						12/1
info	ormation. If m		eded, atta	. If two married people ch another sheet to thi n.				
Par		ibe Your House	hold					
1.	Is this a join							
	■ No. Go to		in a senar	ate household?				
	□ No. <b>Doc</b>		iii a sepai	ate mousemora.				
			st file Offici	al Form 106J-2, <i>Expens</i>	es for Separate Hous	ehold of Deb	tor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list Do Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's related Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Daughter		_ <u>8</u>	Yes
								□ No □ Yes
								□ No
								☐ Yes
								□ No
3.	Do your exp	enses include	_					☐ Yes
O.	expenses of	f people other to d your depende	han $_{\square}$	No Yes				
exp	imate your ex		our bankr	uptcy filing date unless				apter 13 case to report of the form and fill in the
the	value of such	n assistance an	non-cash d have ind	government assistance cluded it on <i>Schedule I</i> :	e if you know Your Income		Your exp	enses
(Off	ficial Form 10	οι. <i>)</i>					Tour exp	5500
4.		r home owners ad any rent for th		ses for your residence r lot.	. Include first mortgag	e 4. \$	S	900.00
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a. \$	3	0.00
	4b. Prope	rty, homeowner's				4b. \$		11.00
				upkeep expenses		4c. \$		0.00
5.		owner's associat nortgage payme		dominium dues <b>our residence,</b> such as l	nome equity loans	4d. \$ 5. \$		0.00
٠.			y ·		oquity louilo	٥. 4		0.00

Debtor 1	Crystal E. Bondurant	Case num	per (if known)	
S. Utili	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	240.00
6b.	Water, sewer, garbage collection	6b.	\$	38.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	395.00
6d.	Other. Specify:	6d.	\$	0.00
Foo	d and housekeeping supplies	7.	\$	750.00
	dcare and children's education costs	8.	\$	100.00
_	hing, laundry, and dry cleaning	9.	\$	150.00
	sonal care products and services	10.	\$	150.00
	lical and dental expenses	11.	\$	100.00
	nsportation. Include gas, maintenance, bus or train fare.			
	not include car payments.	12.	\$	400.00
. Ente	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
. Cha	ritable contributions and religious donations	14.	\$	0.00
. Insu	rance.			
	not include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.		0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	114.00
15d.	Other insurance. Specify:	15d.	\$	0.00
Tax	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spe		16.	\$	0.00
	allment or lease payments: Car payments for Vehicle 1	17a.	\$	274.00
	Car payments for Vehicle 2	17b.	\$	0.00
	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report		Ψ	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 10		\$	0.00
	er payments you make to support others who do not live with you.	·.,.	\$	0.00
Spe		19.		
	er real property expenses not included in lines 4 or 5 of this form or on S		ur Income.	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.		0.00
	er: Specify: Pet Expense	21.	·	50.00
	· · ·		·Ψ	30.00
	culate your monthly expenses		<b>c</b>	0.070.00
	Add lines 4 through 21.		\$	3,672.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J	-2	\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	3,672.00
	culate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	2,958.80
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	3,672.00
23c.	Subtract your monthly expenses from your monthly income.	22	r.	742 20
	The result is your monthly net income.	23c.	\$	-713.20
For e modi	you expect an increase or decrease in your expenses within the year after example, do you expect to finish paying for your car loan within the year or do you expect fication to the terms of your mortgage?			e or decrease because c
■ N				
$\Box$	/oc Explain here:			

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Fill in this infor	mation to identify your	case.			
Debtor 1	Crystal E. Bondu				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
Case number					
(if known)					☐ Check if this is an amended filing
f two married p	tion About a		nsible for supplying co	rrect information. s. Making a false stateme	12/15 ent, concealing property, or or imprisonment for up to 20
,	l8 U.S.C. §§ 152, 1341, 1 ∣n Below	519, and 3571.			
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				otcy Petition Preparer's Notice, d Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules file	ed with this declaration a	nd
X /s/ Crv	stal E. Bondurant		X		
Crysta	al E. Bondurant ure of Debtor 1		Signature o	f Debtor 2	
Date	December 13, 2019		Date		

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B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**

	Southern District of Ohio		
In	re Crystal E. Bondurant	Case No.	
	Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSATION OF ATTO	RNEY FOR DE	CBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attor compensation paid to me within one year before the filing of the petition in bankruptcy be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy	, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept	\$	700.00
	Prior to the filing of this statement I have received	\$	700.00
	Balance Due	\$	0.00
2.	\$ of the filing fee has been paid.		
3.	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
4.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
5.	■ I have not agreed to share the above-disclosed compensation with any other person	unless they are mem	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons copy of the agreement, together with a list of the names of the people sharing in the		
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspec	ts of the bankruptcy c	ase, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in del	termining whether to	file a petition in bankruptcy;

- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

Exemption planning, filing and execution of reaffirmation agreements not presenting an undue hardship.

Debtors have been advised that Rittenhouse v. Eisen has determined pre-petition flat fee agreements to be dischargeable and that payments on pre-petition attorney fee agreements are voluntary and not subject to collection activity.

The compensation agreement with debtor(s) provides, inter alia:

The Chapter 7 fee consists of the pre-petition fee (as disclosed above) for attorney work up to the time of filing and the post-petition fee (as disclosed above as the balance due) for the attorney work following the filing of the petition.

Debtor(s) understand that fees are split between pre-filing work and post-filing work. Post-filing fees accrue following the filing of the petition, and are not due until after the petition is filed. Post-filing fees are in anticipation of attorney work consummated post-filing.

Should the debtor(s) fail to honor this fee agreement, debtor(s) agree that counsel can withdraw. Should the Court construe the post-fiing fee dischargeable, nothing precludes debtor(s) from making voluntary payment. Further, debtor(s) herein request post-filing information notice from counsel of payments made toward pre-filing and post-filing balances. Such notice shall not be construded as an attempt to collect a debt and counsel shall not utilize any process to collect the post-filing fee.

- By agreement with the debtor(s), the above-disclosed fee does not include the following service:
  - a. Preparation of conversions to another chapter, drafting of reaffirmation agreements (certification re undue hardship included);
  - b. Representation of the debtor(s) in any dischargeability actions, lien avoidances, relief from stay actions, or any other contested matters or adversary proceedings not specifically included in the "no look" fee by the local rules.

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In re	Crystal E. Bondurant	Case No.	
	Debtor(s)		

### DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

Debtor(s) agreed to pay \$275/hr for attorney time and \$75/hr for paralegal time billed in increments of .1 hr for fees not included in the flat-fee agreement.

CERTIFICATION
nent of any agreement or arrangement for payment to me for representation of the debtor(s) in
/s/ Michael A. Cox
Michael A. Cox 0075218
Signature of Attorney
Guerrieri, Cox & Associates
3478 N. High Street
Suite 100
Columbus, OH 43214
(614) 267-2871 Fax: (614) 267-2873
coxecf@columbusdebtrelief.com
Name of law firm

Fill in th	is information to identify your case:					irected in this form an	d in Form
Debtor	Crystal E. Bondurant		122	2A-1Su	op:		
Debtor (Spouse,			'	■ 1. Th	nere is no pres	umption of abuse	
United	States Bankruptcy Court for the: Southern District of	of Ohio	_     _	а	pplies will be m	o determine if a presunade under <i>Chapter 7</i>	•
Case no	umber		_     ,	_		icial Form 122A-2).	,
(						does not apply now by service but it could a	
				□ Che	ck if this is a	n amended filing	
Offic	ial Form 122A - 1						
Chap	oter 7 Statement of Your Cur	rent Mon	thly Inc	ome	•		12/19
attach a s case nun qualifyin Part 1:	mplete and accurate as possible. If two married people a separate sheet to this form. Include the line number to wher (if known). If you believe that you are exempted frog military service, complete and file Statement of Exemple Calculate Your Current Monthly Income that is your marital and filing status? Check one or	rhich the additiona m a presumption o ption from Presum	al information a of abuse becau	ipplies. se you d	On the top of and the contract of the contract	ny additional pages, wr narily consumer debts	te your name and or because of
	Not married. Fill out Column A, lines 2-11.	ily.					
	Married and your spouse is filing with you. Fill ou	it both Columns	Δ and R lines	2-11			
	Married and your spouse is NOT filing with you.			2-11.			
	☐ Living in the same household and are not lega			lumns A	A and B. lines 2	2-11.	
	Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evading.	out Column A, lin egally separated	es 2-11; do no under nonban	t fill out kruptcy	Column B. By	checking this box, yo	
101(1 the 6	the average monthly income that you received from all 0A). For example, if you are filing on September 15, the 6-m months, add the income for all 6 months and divide the total ses own the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 throu ult. Do not includ	ıgh Augu de any in	ust 31. If the amo	ount of your monthly incorore than once. For example	ne varied during ole, if both
				Colum Debto		Column B Debtor 2 or non-filing spouse	
	our gross wages, salary, tips, bonuses, overtime, yroll deductions).	and commission	ns (before all	\$	1,218.17	\$	
	imony and maintenance payments. Do not include plumn B is filled in.	payments from a	a spouse if	\$	0.00	\$	
<b>of</b> fro an	I amounts from any source which are regularly payou or your dependents, including child support im an unmarried partner, members of your household roommates. Include regular contributions from a speed in. Do not include payments you listed on line 3.	Include regular of, your dependen	contributions ts, parents,	\$	2,958.80	\$	
	et income from operating a business, profession,						
_		Debt \$ 0.00	or 1				
	oss receipts (before all deductions) dinary and necessary operating expenses	-\$ 0.00 -\$					
	et monthly income from a business, profession, or far	0.00	Copy here ->	\$	0.00	\$	
	et income from rental and other real property						
	,	Debt	or 1				
Gr	oss receipts (before all deductions)	\$ 0.00					
	dinary and necessary operating expenses	-\$ 0.00	O	Φ.	0.00	r.	
	et monthly income from rental or other real property	\$	Copy here ->		0.00	\$	
7. Int	erest, dividends, and royalties			\$	0.00	~	

Official Form 122A-1

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Crystal E. Bondurant Debtor 1 Case number (if known) Column A Column R Debtor 2 or Debtor 1 non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse \$ 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 4,176.97 +| \$ 4.176.97 \$ each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 4,176.97 Multiply by 12 (the number of months in a year) **x** 12 50.123.64 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. ОН Fill in the number of people in your household. 76,260.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare?

Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2.

14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2.

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Debtor 1	Crystal E. Bondurant	Case number (if known)	
Part 3:	Sign Below		
	By signing here, I declare under penalty of perjury that the inform	ation on this statement and in any attac	hments is true and correct.
	χ /s/ Crystal E. Bondurant		
	Crystal E. Bondurant Signature of Debtor 1		
Dat	Tee December 13, 2019  MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this fo	orm.	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. AEP Attn: Bankruptcy PO Box 24401

Canton, OH 44701-4401

Alexandria Vaneck, Esq. PO Box 12577 Toledo, OH 43606

All State Career Inc. 1200 Lebanon Road #1 West Mifflin, PA 15122

Charter Communications PO Box 3019 Milwaukee, WI 53201

Conrad Credit Company 476 W. Vermont Avenue Escondido, CA 92025

Convergent Outsourcing 10900 Corporate Center Drive Suite 100 Houston, TX 77041

Credit Acceptance Corporation PO Box 5070 Southfield, MI 48086

Credit Business Services PO Box 4127 Fort Walton Beach, FL 32549

Dooleys Orchard 990 Plumway Lane Lewis Center, OH 43035

Dynamic Recovery Solutions PO Box 25759 Greenville, SC 29616

Enchanced Recovery Company, LLC 8014 Bayberry Rd. Jacksonville, FL 32256

FABCO 4640 Executive Dr. Columbus, OH 43220

Mount Carmel Health 6150 E. Broad Street Columbus, OH 43213

Nelnet Loans PO Box 82561 Lincoln, NE 68501

Progressive Leasing 256 W. Data Drive Draper, UT 84020

Sprint
Bankruptcy Department
PO Box 7949
Overland Park, KS 66207

St. Andrews Bay ER Physicians 615 N. Bonita Avenue Panama City, FL 32401

Stern Recovery Services 1102 Grecade Street Greensboro, NC 27408-8710

Steven Jackson 5154 Buckeye Court Lewis Center, OH 43035

U.S. Department of Education/GLELSI 2401 International Lane Madison, WI 53704

Untied Collection Bureau 5620 Southwyck Boulevard Suite 206 Toledo, OH 43614